

**4950 Error Return File Format**

With the implementation of the 837 data on the Encounter Data Warehouse, an error return file will be produced for each submission. The file will contain information on errors produced from the 837 data element edits. The Error Return File contains a header record, detail records that indicate which errors were found, and a trailer record. The formats of the header, detail, and trailer records are listed below.

**837 Encounter Error Return File Header Layout**

Field Name	Type	Size	Begin	End	Comments
EDI-HEADER-RECORD					
EDI-TYPE	X(4)	4	1	4	Value "HDDR"
EDI-APP	X(4)	2	5	6	Value "MA"
EDI-USER	X(4)	4	7	10	Value "MMIS"
EDI-USER-ID	X(4)	4	11	14	Value "00XX" ("XX" = Service Bureau Claim ID)
EDI-DATE-CYMD	X(8)	8	15	22	Creation Date (format is YYYYMMDD)
EDI TRANSFER DATE					Transfer date or use creation date
TRANSFER-YYYY	X(4)	4	23	26	
TRANSFER-MM	X(2)	2	27	28	
TRANSFER-DD	X(2)	2	29	30	
TRANSFER-HH	X(2)	2	31	32	
TRANSFER-MINUTE	X(2)	2	33	34	
EDI-FILE					
EDI-FILE-BEG	X(4)	4	35	38	Value "4950"
EDI-RUN-TYPE	X(1)	1	39	39	Value "P" for production or "T" for test
EDI-BATCH	X(3)	3	40	42	Not used
FILLER	9(10)	10	43	52	
FILLER	X(101)	101	53	152	

**837 Encounter Error Return File Detail Record**

The following defines the 837 Error Return File that reflects the errors detected by the Encounter Data Warehouse edit process. Information on each error is included in the fields that are part of a record that describes the error.

**837 Encounter Error Return File Detail Record Layout**

Field Name	Type	Size	Begin	End	Comments
ENCOUNTER-ERROR-RETURN-RECORD					
SUBMITTER-ID	X(4)	4	1	4	Also called "autobiller ID" or "service bureau" - identifier of the organization that physically transmits the data.

CAPITATED-PLAN-ID	X(20)	20	5	24	Also called "Health Plan ID" or "Primary Payer ID", this is the ID of the Qualified Health Plan, Community Mental Health Services Provider or Coordinating Agency, etc.
RELATED-PLAN-ID	X(20)	20	25	44	Plan ID of a related plan, if any (e.g. the PIHP corresponding to a CMHSP.)
SUBMISSION-NUMBER	X(20)	20	45	64	Number identifying a batch - may not be reused by the same capitated health plan.
ENCOUNTER-REFERENCE-NUMBER	X(30)	30	65	94	The Encounter Reference Number assigned by the capitated health plan.
ENCOUNTER-LINE-NUMBER	X(3)	3	95	97	The Encounter Line Number assigned by the capitated health plan.
RECORD-TYPE	X(1)	1	98	98	Values are: "O" = Original "R" = Replacement "V" = Void
RECORD-CATEGORY	X(1)	1	99	99	Values are: "P" = Professional "I" = Institutional "D" = Dental
ERROR-NUMBER	X(5)	5	100	104	Format is "20nnn". Refer to "Encounter Error Listing".
ERROR-SEVERITY	X(2)	2	105	106	Values are: "RB" = Reject batch "RE" = Reject encounter "RL" = Reject line "IO" = Information only
ERROR-FIELD	X(20)	20	107	126	First 20 positions of erroneous field
BATCH-SEQUENCE-NUMBER	X(8)	8	127	134	An internally generated number indicating the relative position of a batch within an input file
ASSIGNED-SEQ-ERN	X(13)	13	135	147	ASSIGNED-SEQ-ERN, ASSIGNED-SEQ-TYPE and ASSIGNED-SEQ-ELN are internal Encounter Reference Numbers, Types and Line Numbers assigned by the edit program for its own use. However, the ASSIGNED-SEQ-ERN values will be assigned sequentially in the order in which the encounters appear in the input file, so it can also be used as a sequence number to sort the error results in that order.
ASSIGNED-SEQ-TYPE	X(2)	2	148	149	Type field indicating source of encounter: "60" = CMH "61" = SA "62" = MICHild "63" = Medicaid "64" = Delta Dental "65" = County Health Plan

ASSIGNED-SEQ-ELN	X(3)	3	150	152	Internal ELN assigned to this encounter line by the system
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### 837 Encounter Error Return File Trailer Record

This 837 Error Return File EDI Trailer record follows the errors detected by the Encounter Data Warehouse edit process.

### 837 Encounter Error Return File Trailer Record Layout

Field Name	Type	Size	Begin	End	Comments
EDI-HEADER-RECORD					
EDI-TYPE	X(4)	4	1	4	Value "TRLR"
EDI-APP	X(4)	2	5	6	Value "MA"
EDI-USER	X(4)	4	7	10	Value "MMIS"
EDI-USER-ID	X(4)	4	11	14	Value "00XX" ("XX" = Service Bureau Claim ID)
EDI-DATE-CYMD	X(8)	8	15	22	Creation Date (format is YYYYMMDD)
EDI TRANSFER DATE					Transfer date or use creation date
TRANSFER-YYYY	X(4)	4	23	26	
TRANSFER-MM	X(2)	2	27	28	
TRANSFER-DD	X(2)	2	29	30	
TRANSFER-HH	X(2)	2	31	32	
TRANSFER-MINUTE	X(2)	2	33	34	
EDI-FILE					
EDI-FILE-BEG	X(4)	4	35	38	Value "4950"
EDI-RUN-TYPE	X(1)	1	39	39	Value "P" for production or "T" for test
EDI-BATCH	X(3)	3	40	42	Not Used
FILLER	9(10)	10	43	52	Record count including header and trailer (right-justified and zero-filled).
FILLER	X(101)	101	53	152	